

Fast Facts

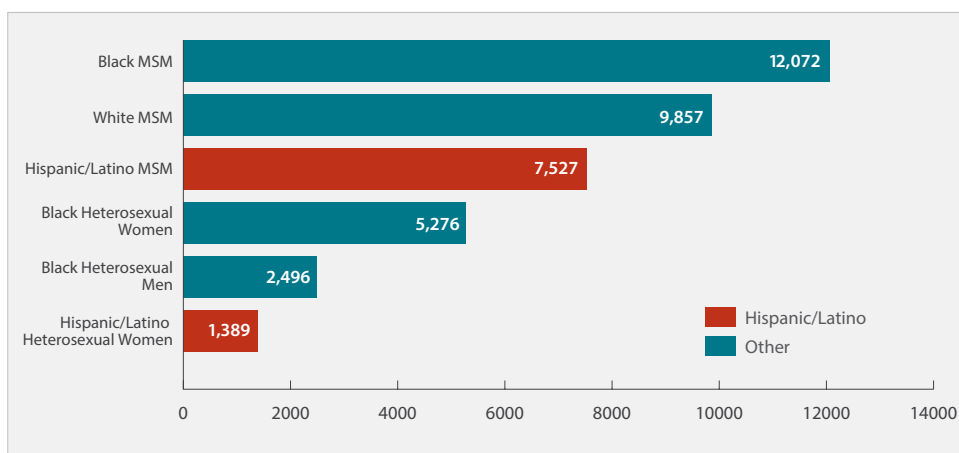
- Hispanics/Latinos are disproportionately affected by HIV.
- 7 in 10 new HIV diagnoses among Hispanics/Latinos occur in gay and bisexual men.
- Less than half of Hispanics/Latinos with HIV are receiving medicines to treat their infection.

HIV is a serious threat to the health of the Hispanic/Latino^a community. In 2013, Hispanics/Latinos accounted for almost one quarter of all estimated new diagnoses^b of HIV infection in the United States and 6 dependent areas,^c despite representing about 17% of the total US population.

The Numbers

- In 2013, Hispanics/Latinos accounted for 23% (10,888) of the estimated 48,145 new diagnoses of HIV infection in the United States and six dependent areas. Of those, 85% (9,266) were in men, and 15% (1,610) were in women.
- Gay, bisexual, and other men who have sex with men^d accounted for 81% (7,527) of the estimated HIV diagnoses among Hispanic/Latino men in 2013. The annual number of diagnoses among Hispanic/Latino gay and bisexual men has increased 16% since 2008.
- Eighty-six percent (1,389) of the estimated HIV diagnoses among Hispanic women/Latinas were attributed to heterosexual contact.^e
- In 2012, Hispanics/Latinos accounted for 21% (251,700) of the estimated 1.2 million people with HIV infection in the United States.
- The estimated rate of Hispanics/Latinos living with diagnosed HIV infection in 2012 was 347.8 per 100,000 people in the United States. By comparison, the rate was 149.2 among whites and 1,011 among blacks/African Americans.
- Of the 6,955 deaths related to AIDS in the United States in 2013, 927 (13%) were Hispanics/Latinos.
- By the end of 2012, an estimated 125,051 Hispanics/Latinos with AIDS had died in the United States and 6 dependent areas (deaths can be due to any cause). In 2013, HIV was the eighth leading cause of death among Hispanics/Latinos aged 25 to 34 and the ninth leading cause of death among Hispanics/Latinos aged 35 to 54.
- Data from 2012 and 2013 indicate that 83.0% of Hispanics/Latinos living with diagnosed HIV were linked to medical care within three months of diagnosis and 54.8% were retained in care.^f Of those receiving medical care, 43.3% were prescribed antiretroviral therapy (ART), and 35.6% had achieved viral suppression.^g

Estimated New HIV Diagnoses in the United States and 6 Dependent Areas for the Most-Affected Subpopulations, 2013



Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2013. *HIV Surveillance Report* 2015;25. Subpopulations representing 2% or less of HIV diagnoses are not reflected in this chart. Abbreviation: MSM, men who have sex with men.

^a Hispanics/Latinos can be of any race.

^b The HIV and AIDS diagnoses numbers are the estimated number of people diagnosed with HIV infection regardless of stage of disease at diagnosis and the estimated number of people diagnosed with AIDS, respectively, during a given time period.

^c Dependent areas: American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

^d This fact sheet uses the term *gay and bisexual men*, but the term *male-to-male sexual contact* is used in CDC surveillance systems. It indicates the behaviors that transmit HIV infection, not how individuals self-identify in terms of their sexuality.

^e Heterosexual contact with a person known to have, or be at high risk for, HIV infection.

^f In 27 states and the District of Columbia (the areas with complete lab reporting by December 2014).

^g A person with a suppressed viral load has a very low level of the virus. That person can stay healthy and has a dramatically reduced risk of transmitting the virus to others.

Prevention Challenges

A number of factors contribute to the HIV epidemic in Latino communities.

- **A greater number of people are living with HIV** (prevalence) in Hispanic/Latino communities than among some other races/ethnicities. Hispanics/Latinos tend to have sex with partners of the same race/ethnicity, increasing the risk of HIV infection.
- While data suggest that most Hispanic/Latino men with HIV were infected through sexual contact with other men, the behavioral risk factors for HIV infection **differ by country/region of birth**. For example, men born in Puerto Rico have a higher percentage of diagnosed HIV infections attributed to injection drug use (IDU).
- The majority of HIV infections diagnosed among Hispanic/Latino women are attributed to **sexual contact with men**. Being unaware of a partner's risk factors (e.g., IDU, multiple sexual partners, and male-to-male sexual contact) may place Hispanic/Latino women at increased risk for HIV.
- Research shows that the presence of another **sexually transmitted disease (STD)** makes it easier to become infected with HIV. Hispanics/Latinos have relatively high rates for STDs, including chlamydia, gonorrhea, and syphilis.
- **Cultural factors** may increase the risk of HIV infection. Some Hispanics/Latinos might not seek testing, counseling, or treatment if infected because of stigma or fear of discrimination. Traditional gender roles, cultural norms ("machismo," which stresses virility for Hispanic/Latino men, and "marianismo," which demands purity from Latinas), and the stigma around homosexuality may add to prevention challenges.
- **Socioeconomic factors**, such as poverty, migration patterns, lower educational level, inadequate or no health insurance, and limited access to health care, and language barriers may contribute to HIV infection among Hispanics/Latinos by limiting awareness about risks and opportunities for testing and care.
- Undocumented Hispanic/Latino immigrants **may be afraid of disclosing their immigration status**, making them less likely to access HIV prevention services, get an HIV test, or seek adequate treatment and care if they are living with HIV.

What CDC Is Doing

The Centers for Disease Control and Prevention (CDC) and its partners are pursuing a high-impact prevention approach to advance the goals of the *National HIV/AIDS Strategy: Updated to 2020* (www.aids.gov/federal-resources/national-hiv-aids-strategy/overview/) and maximize the effectiveness of current HIV prevention methods. Activities include

- Support and technical assistance to health departments and community-based organizations to deliver effective prevention interventions for Hispanics/Latinos.
- The *Act Against AIDS* (www.cdc.gov/actagainstaids) campaigns, including
 - *We Can Stop HIV One Conversation at a Time* (www.cdc.gov/actagainstaids/campaigns/oneconversation/index.html), en Español *Podemos Detener el VIH Una Conversación a la Vez* (www.cdc.gov/actagainstaids/spanish/campaigns/oneconversation/index.html), which encourages Hispanics/Latinos to talk openly about HIV, and
 - New community partnerships (www.cdc.gov/hiv/funding/announcements/ps15-1505/index.html) to raise awareness about testing, prevention, and retention in care among populations disproportionately affected by HIV, including Hispanics/Latinos.
- The Comprehensive Human Immunodeficiency Virus Prevention Programs for Health Departments (www.cdc.gov/hiv/funding/announcements/ps12-1201/index.html), a 5-year, \$339 million HIV prevention initiative for health departments in states, territories, and select cities, including those serving Hispanic/Latino clients.

For more information go to www.cdc.gov/hiv/group/racialethnic/hispaniclatinos/index.html.

Additional Resources

CDC-INFO
1-800-CDC-INFO (232-4636)
www.cdc.gov/info

CDC HIV Website
www.cdc.gov/hiv

CDC Act Against AIDS Campaign
www.cdc.gov/actagainstaids